

Sunset Public Hearing Questions for
Committee for Clinical Perfusionists
Created by Section 63-28-112, *Tennessee Code Annotated*
(Sunset Termination June 2020)

Enabling Statute, Purpose, and Rules and Regulations

- 1. Provide a brief introduction to the committee, including information about its purpose, statutory duties, staff, and administrative attachment.**

The Committee for Clinical Perfusionists (the Committee) was established by the General Assembly in 1999 to license those individuals actively engaged in the practice of perfusion as that term is defined in Tenn. Code Ann. §63-28-102(6). The Committee is responsible for safeguarding the health, safety, and welfare of Tennesseans by requiring those who practice perfusion to be qualified. The Committee, working with the Board, interprets the laws, rules, and regulations to determine the appropriate standards of practice to ensure the highest degree of professional conduct. The Committee is authorized to issue licenses to qualified candidates who have completed appropriate education and successfully completed required examinations. The Committee, along with the Board, determines the appropriate standard of care, investigates alleged violations of laws and rules, and disciplines licensees who are found guilty of such violations.

The Committee meets two (2) times per year. A majority of the members of the Committee shall constitute a quorum. The meetings are open to the public. The Governor appoints all members of the Committee. The Committee consists of four (4) perfusionist members; one (1) hospital administrator from a licensed healthcare facility in Tennessee in which cardiac surgery is performed; one (1) licensed physician who shall be either a cardiac surgeon or a cardiac anesthesiologist; and one (1) public member.

- 2. Has the committee promulgated rules and regulations? If yes, please cite the reference.**

Yes, the Rules of Board of Medical Examiners Committee for Clinical Perfusionists are located in Chapter 0880-11.

Committee Organization

- 3. Provide a list of current members of the committee. For each member, please indicate who appointed the member, statutory member representation, the beginning and end of the member's term, and whether the member is serving a consecutive term.**

All Committee members are appointed by the governor, listed below:

Member	Representation	Term Beginning	Term Ending	Consecutive?
Wendy Menowsky	Perfusionist	June 2017	July 2021	N
Dorris Dozier	Perfusionist	November 2016	July 2022	N
Barbara Ebey	Perfusionist	June 2013	July 2018	N
Deann Montchall	Hospital Administrator	July 2018	July 2021	N
V. Seenu Reddy	Cardiovascular Surgeon	January 2017	July 2021	N
Alice Walker	Public Member	August 2008	July 2014	N
Chad Smith	Perfusionist	June 2017	July 2021	N

4. Are there any vacancies on the committee? If so, please indicate how long the position has been vacant and explain steps that have been taken to fill any vacancies.

Two members' terms have expired and are eligible for appointment. The term of Ms. Ebey, who is a Clinical Perfusionist, expired in July 2018. The term of Ms. Walker, who serves as a public member, expired in 2014. The Division of Health Licensure and Regulation is working with Governor Lee's Office on next steps.

5. How many times did the committee meet in Fiscal Years 2018 and 2019? How many members were present at each meeting? Please note meetings where the committee did not have a quorum.

During this time frame, the Committee met four times: October 24, 2017 with 5 members present; April 24, 2018, with 2 members present (an emergency teleconference was held in order to establish a quorum for the purpose of ratifying initial approval of application set to expire); October 23, 2018, with 5 members present; and April 23, 2019, with 5 members present.

Financial Information

6. What were the committee's revenues and expenditure for Fiscal Years 2018 and 2019? Does the committee carry a fund balance? If yes, please provide additional relevant information regarding the fund balance.

For fiscal year 2018, the Committee had revenues of \$27,510.00 and total expenditures of \$14,877.83. Fiscal year 2019 has not been closed at this time, but revenues collected year-to-date are \$16,020.00. The Committee had a fund balance of \$152,282.10 as of June 30, 2018. At this time, the June 30, 2019 fund balance is unavailable, because FY2019 books have not yet closed.

7. What per diem or travel reimbursements do committee members receive? How much was paid to committee members in Fiscal Years 2018 and 2019?

As previously mentioned, FY2019 books are not closed at this time, but as of July 12, 2019, no member had received per diem or travel reimbursement.

8. Please provide a list of fees collected and indicate whether these fees were established through rule or through state law.

According to the Committee's rules the following fees are collected:

Fee Category	Fee Amount	Rule or Statute
Initial Licensure	\$250.00	Rule
Biennial Renewal	\$250.00	Rule
Late renewal fee	\$100.00	Rule
Licensure reinstatement	\$50.00	Rule
Duplication of license fee	\$25.00	Rule
Biennial State Regulatory	\$10.00	Rule

Sunshine Law, Public Meetings, and Conflict of Interest Policies

9. Is the committee subject to Sunshine law requirements (Section 8-44-101 et seq., *Tennessee Code Annotated*) for public notice of meetings, prompt and full recording of minutes, and public access to minutes? If so, what procedures does the committee have for informing the public of meetings and making minutes available to the public?

The Board is subject to the sunshine law requirements of Tenn. Code Ann. 8-44-101 et seq. A public meeting notice is posted to the board's web site by the 14th day of the month proceeding the month of the meeting date as well as posting the information on the Public Participation Calendar. The Board's administrative staff attends all meetings and takes minutes. Those minutes are then prepared for review and ratification by the Board at its next regularly scheduled meeting. After the minutes are ratified, they are then placed on the Board's website.

10. Does the committee allow for public comment at meetings? Is prior notice required for public comment to be heard? If public comment is not allowed, how does the committee obtain feedback from the public and those they regulate?

The Committee does not function as a public forum. The business meetings of a health related board/committee are conducted in full view of the public pursuant to a sunshine notice which provides information for physical location, a link to remotely view live-streaming of the meeting and notice of agenda items. The meeting is guided by this published agenda. However, the chair of a board/committee will often recognize members of the public who signify a desire to be heard on a matter properly before the board.

Additionally, all health related boards have instituted a sign-in sheet procedure that would permit members of the public to make time limited comments on matters properly noticed and before the board for consideration. Discussion of matters not receiving proper notice would violate the sunshine laws of Tennessee. Therefore, should a member of the public have a topic or comment that requires discussion, the most effective practice is to make the request known to the board administrator or director in advance to have the matter placed on the monthly sunshine notice. Boards/committees also accept and review letters to the board/committee as another means of addressing questions/concerns raised by the public and stakeholders.

A video recording of the meeting is available on the Department's web site for one month following the meeting. An audio recording of the meeting is also available upon request.

11. Does the committee have policies to address potential conflict of interest by committee members, employees, or other state employees who work with the committee?

Yes. All board members are educated on the Department of Health's Conflict of Interest Policy and reminded during the course of each meeting of the obligation to strictly adhere to the policy. Board members are required to sign a conflict of interest statement upon appointment or as soon as practical and annually thereafter. It is the responsibility of the Board Administrator to ensure that the Conflict of Interest Statement is properly and timely signed. Board staff is required to sign a new Conflict of Interest statement annually. The Board's administrative office keeps signed copies on file in the Central Office of Health Related Boards.

12. Does the committee have a website? If so, please provide the web address. What kind of public information is available on the website?

Yes: <https://www.tn.gov/health/health-program-areas/health-professional-boards/cp-board.html>

Information available to the public includes a listing of board members; the schedule of meetings; meeting minutes; information regarding national organizations relating to clinical perfusion; clinical perfusion educational programs; information regarding continuing education; information regarding licensure including a link to look up an individual's licensure information and a link to the online renewal portal; information regarding complaints; applications; legislative updates; statutes and rules which provides a link to the Tennessee Code Annotated as well as the Rules and Regulations of the Board; and a section containing the policies adopted by the Board.

Application and Licensure Process

- 13. Describe the criteria for issuing a license. How were these criteria determined? How long does the licensing process take? What are the established time goals for obtaining a license? Are those goals being met?**

Licensure qualifications are determined through statutes and through the rules promulgated by the Committee for Clinical Perfusionists. Application processing time averages a completion timeframe of 6-8 weeks; however, there is a 90-day benchmark to complete an application. Thus, applications are being processed within established timeliness benchmarks. Generally speaking, once an application has been received, the administrator and a clinical consultant review the application. The applicant is either licensed by the consultant or asked to appear before the Committee for an interview and determination by the Committee.

- 14. How many individuals and/or businesses are currently licensed by the committee? Please provide a list by category/type of license.**

As of July 19, 2019, there are 141 active licensed Clinical Perfusionists.

- 15. How many applications did the committee receive in Fiscal Years 2018 and 2019? By category, how many applications were approved and a license granted? How many applications were rejected? Of those rejected, what was the primary reason for rejection?**

14 new applicants were approved and licensed. No applications were rejected.

- 16. How many licenses were revoked during the same time period? What were the primary reasons for revocation? Please provide information by type of license.**

Zero

Complaint Handling Process

- 17. Describe the complaint handling process. Please explain how consumers are made aware of the process for filing a complaint, how complaints are taken and investigated, how complaints are resolved and what actions may be taken as a result.**

All complaints are handled through the Office of Investigations. Below is what is provided on the website:

Filing a Complaint

While the Department of Health hopes that you will never have to file a complaint against a health care practitioner, doing so is a simple matter. You may contact the Complaint Divisions of the Department of Health at 1-800-852-2187 to request a complaint form. (PH-3466)

The form must be completed in its entirety. All materials received in connection with the complaint will become property of the Department of Health and cannot be returned.

Please return the complaint to:

Office of Investigations
665 Mainstream Drive, 2nd Floor, Suite 201
Nashville, TN 37243

18. What are the time goals for resolving complaints and are those goals being met?

All complaints are handled through the Office of Investigations. The process is as follows:

Step 1. Report or complaint is received in the Office of Investigations.

Step 2. If the complaint constitutes a violation within the scope of authority of the board/committee, a file is opened and assigned a priority code base on harm or risk of harm.

Step 3. The complaint is reviewed by an attorney and clinical consultant to determine early disposition (Closed no action, Letter of Warning or Letter of Concern) or prepare for a field investigation – First Phase Review

Step 4. Complaint goes out for investigation, if necessary. The Office of Investigations assigns timeliness goals from the date the complaint is assigned to the field to the date the complete investigation is returned from the field. The goals are assigned based upon harm or potential harm and rank as follows:

Immediate Jeopardy – 7 days
Actual Harm Severe – 30 days
Actual Harm Not Severe – 60 days
Potential Harm – 120 days
No Potential Harm – 150 days

Step 5. Complete investigation is reviewed by an attorney and a clinical consultant to determine disposition or further prosecution for disciplinary action – Second Phase Review

Step 6. If the complaint is deemed to require disciplinary action, the complete file is transferred to the Office of General Counsel for further prosecution.

- Next possible steps include: Propose a Consent Order (prior to notice of charges); Propose an Agreed Order (after notice of charges) or Proceed to administrative trial.

For the Committee for Clinical Perfusionists, all investigation goals have been met.

19. How many complaints were received in Fiscal Years 2018 and 2019? What types of complaints were received? What, if any, enforcement actions did the committee take as a result of complaints filed?

Zero.

Reports, Major Accomplishments, and Proposed Legislative Changes

20. What reports does the committee prepare concerning its activities, operations, and accomplishments? Who receives copies of these reports? Please provide a link to any such reports issued in Fiscal Years 2018 and 2019.

No reports are prepared.

21. What were the committee's major accomplishments during Fiscal Years 2018 and 2019?

The committee has not undertaken any major projects, but has effectively addressed all normal business.

22. Please describe any items related to the committee that require legislative attention and your proposed legislative changes.

No legislative action is needed at this time.

23. Should the committee be continued? To what extent and in what ways would the absence of the committee affect the public health, safety, or welfare of the citizens of Tennessee?

Yes, to promulgate rules and policies related to the practice of clinical perfusion.